


**Direct Deposit Authorization**

<b>General Information</b>	<p>First Name: _____ Last Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Telephone: _____</p> <p>Policy: _____</p> <p>Division: _____</p> <p>Certificate: _____</p>
<b>Banking Information</b>	<p>Please attach a blank cheque marked "VOID" or provide your banking information below, if no cheque is available.</p> <p style="text-align: center;">Name of Financial Institution: _____</p> <p style="text-align: center;">Address of Financial Institution: _____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p>Insert the numbers found on the bottom of the cheque, as shown in the following example.</p> <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 20px;"> <p>Branch Number:     <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Financial Institution Number:     <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Account Number: _____</p> </div> <div style="border: 1px solid black; padding: 5px; text-align: center;">  <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; font-size: 8px;">Branch Number</div> <div style="border: 1px solid black; padding: 2px; font-size: 8px;">Financial Institution Number</div> <div style="border: 1px solid black; padding: 2px; font-size: 8px;">Account Number</div> </div> </div> </div>
<b>Authorization</b>	<p>I hereby authorize and request Assumption Life to credit payments due to me to my account with the financial institution specified above or found on the attached cheque.</p> <p>This authorization may be cancelled at any time upon written notice by me.</p>
<b>Date &amp; Signature</b>	<p>_____</p> <p style="display: flex; justify-content: space-between;"> <span>Authorized Signature</span> <span>Date (DD/MM/YYYY)</span> </p>